

ARCH Community Housing Trust
Direct Debit Authorization Form

This Agreement for AUTOMATIC PAYMENT OF LAND LEASE FEES is made and is effective as of the first day of recording of the Covenant (“Effective Date”), by and between _____ (“Home Owner”) and ARCH Community Housing Trust, inc. an Idaho nonprofit corporation (“CLT”, “Community Land Trust” “Housing Trust”).

Home Owners acknowledge that they are required to pay these fees via an auto debit initiated by ARCH. Home Owner also acknowledges that it is their responsibility to notify ARCH immediately of any change to the bank account that would affect the timely processing of this debit.

Debit Date: On the _____ of each month.

Amount: _____

Home Owner Signature

ARCH Community Housing Trust, Inc
Michelle Griffith, Executive Director

Account Information

[] Checking (attached voided check)

Financial Institution: _____

Personal Account Number:																			
ABA (Routing)Number:																			

Please attach voided check or savings deposit slip here.